## NONPROVISIONAL PATENT APPLICATION

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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P.O. Box 19928 Alexandria, Virginia						Date:	Septembe	er 10, 2003	
Telephone: (703) 836-6400 Facsimile: (703) 836-2787			MAIL STOP PATENT APPLICATION						
Customer Number:	25944	N	ONI	PROVISION			TRANSMI	ITTAL	
Commissioner for Pate P.O. Box 1450 Alexandria, VA 22313					RULE §1	1.53(D)		OLA	
Sir:								0	
Transmitted herewith for	or filing under 37	C.F.R. §1.53(b) is the	non	provisional p	atent applica	ation			
For (Title):	TEXT SENTEN	CE COMPARING A	PPA	RATUS					
By (Inventors):	Shaoming LIU	<del></del>							
Formal drawings (Figs. 1-13; 7 sheets) are attached.  Use Figure for front page of Publication.  A Declaration and Power of Attorney is filed herewith.  This application claims benefit of Provisional Application No filed  (A Preliminary Amendment is attached to reflect this claim in the Specification if not already present.)  This patent application is assigned to FUJI XEROX CO., LTD.  The executed Assignment is filed herewith.  An Information Disclosure Statement is filed herewith.  Entitlement to small entity status is hereby asserted.  A Preliminary Amendment is filed herewith.  Priority of foreign application No. 2002-268728 filed September 13, 2002 in JAPAN is claimed (35 U.S.C. §119).  A certified copy of the above corresponding foreign application is filed herewith.  This application is NOT to be published under 35 U.S.C. 112(b). The undersigned attorney or agent hereby certifies the the invention disclosed in this application has not been and will not be the subject of an application filed in another country, or under a multilateral international agreement, that requires publication at eighteen months after filing.  The filing fee is calculated below:  CLAIMS IN THE APPLICATION AFTER ENTRY OF ANY PRELIMINARY AMENDMENT NOTED ABOVE  SMALL ENTITY  OTHER THAN A SMALL ENTITY									
FOR:	NO. FILED	NO. EXTRA		RATE	FEE	<u>OR</u>	RATE	FEE	
BASIC FEE					\$ 375	<u>OR</u>		\$ 750	
TOTAL CLAIMS	28 - 20	= 8	-	x 9=	\$	<u>OR</u>	x 18	\$ 144	
INDEP CLAIMS	4 - 3	= 1		x 42 =	\$	<u>OR</u>	x 84	\$ 84	
* If the difference is less than zero, enter "0".				+ 140 =	\$	<u>OR</u>	+ 280	\$	
		of \$ <u>978</u> to cover the	filin	TOTAL g fee is attach	\$ ned. Except	OR as otherv	TOTAL	\$ 978 erein, the	

Commissioner is hereby authorized to charge any other fees that may be required to complete this filing, or to credit any overpayment, to Deposit Account No. 15-0461. Two duplicate copies of this sheet are attached.

Respectfully submitted,

James A. Oliff

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